



03500.016270.

PATENT APPLICATION

11A
N. Smith
10/23/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: Stephen J. Stein
Takaharu KONDO, et al.)
: Group Art Unit: 1775
Application No.: 10/092,617)
:
Filed: March 8, 2002)
:
For: SEMICONDUCTOR ELEMENT,) October 14, 2003
AND METHOD OF FORMING. : (Tuesday After Columbus Day Holiday)
SILICON-BASED FILM)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
OCT 22 2003
TC 1700

AMENDMENT

Sir:

In response to the Office Action dated July 11, 2003, please amend the above-identified application as follows.

10/17/2003 HUUONG1 00000090 10092617

01 FC:1201

258.00 OP

1775
\$



In re Application of:

Docket No.: 03500.016270.

Takaharu KONDO, et al.

Application No.: 10/092,617

Examiner: Stephen J. Stein

Filed: March 8, 2002

Group Art Unit: 1775

For: SEMICONDUCTOR ELEMENT, AND
METHOD OF FORMING SILICON-BASED
FILM

Date: October 14, 2003
(Tuesday After Columbus Day Holiday)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ An additional fee is required.

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	88	MINUS	92	= 0	x \$9 \$18	\$ 0.00
INDEP. CLAIMS	9	MINUS	6	= 3	x \$43 \$86	\$ 258.00
Fee for Multiple Dependent claims \$135°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 258.00

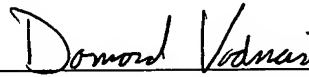
☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☒ A check in the amount of \$ 258.00 is enclosed.

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- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Damond E. Vadnais
Registration No. 52,310

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DEV:cmv

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